#### FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D MAY 1 & 2004

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	$\mathcal{C}$
OMB APPROVAL	
OMB Number: 3235-0076	
Expires: May 31, 2005	
Estimated average burden	

16.00

SEC USE ONLY							
Prefix			Serial				
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hours per response:

Name of Offering (☐ check if this is an amendment		
	Units of Limited Liability Company Interests	5
Filing Under (Check box(es) that apply): $\square$ Ru	ule 504 🔲 Rule 505 🗹 Rule 506 🛚	☐ Section 4(6) ☐ ULOE
Type of Filing: ☐ New Filing ☑ Amendm		
· /	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issue	er	
Name of Issuer ( check if this is an amendment	nt and name has changed, and indicate change.)	
Goldman Sachs Global Event Driven, LLC		
Address of Executive Offices (Nur	mber and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Goldman Sachs Princeton LLC, 701 Mo	unt Lucas Road, Princeton, New Jersey	(609) 497-5500
08540		
Address of Principal Business Operations (N	Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		
Brief Description of Business		PROCESSED
		1100200
To operate as a private investment fund.		MAY 21 2004.
Type of Business Organization		
☐ corporation	☐ limited partnership, already formed	other (please specify): FINANCIAL
□ business trust	☐ limited partnership, to be formed	Limited Liability Company
	Month Year	
Actual or Estimated Date of Incorporation or Orga	anization: 1 1 0 1	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviat	tion for
	State ON for Canada, TNI for ather familiar inn	isdiction) DE
	State: CN for Canada; FN for other foreign jur	isdiction)   D   E

#### **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDENTIFICATION DATA
2.	Enter the information requested for the following:
	* Each promoter of the issuer, if the issuer has been organized within the past five years;
	* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
	* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
	* Each general and managing partner of partnership issuers.
Ch	eck Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or  Managing Partner
Ful	l Name (Last name first, if individual)
Go	ldman Sachs Princeton LLC (the Issuer's Managing Member)
	siness or Residence Address (Number and Street, City, State, Zip Code)
	Mount Lucas Road, Princeton, New Jersey 08540
	eck Box(es) that Apply:   Promoter  Beneficial Owner  Executive Officer  Director*  General and/or *of the Issuer's Managing Member  Managing Partner
	I Name (Last name first, if individual)
	ırk, Kent A.
ļ	siness or Residence Address (Number and Street, City, State, Zip Code)
	Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Cn	eck Box(es) that Apply:   Promoter  Beneficial Owner  Executive Officer  Director*  General and/or  *of the Issuer's Managing Member  Managing Partner
Ful	l Name (Last name first, if individual)
La	wson, Hugh J.
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)
c/o	Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Ch	eck Box(es) that Apply:   Promoter  Beneficial Owner  Executive Officer  Director*  General and/or *of the Issuer's Managing Member  Managing Partner
1	ll Name (Last name first, if individual)  yy, Tobin V.
	siness or Residence Address (Number and Street, City, State, Zip Code)
c/o	Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Ch	eck Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director*   General and/or  *of the Issuer's Managing Member   Managing Partner
	l Name (Last name first, if individual)  alker, George H.
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)
c/o	Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
Ch	eck Box(es) that Apply:
1	l Name (Last name first, if individual)  ll, Natalie M.
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)  Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540
	eck Box(es) that Apply:
	l Name (Last name first, if individual)  lge, Karen M.
Jul	150, 1xar ou 1/1,

Business or Residence Address (Number and Street, City, State, Zip Code)

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - \* Each promoter of the issuer, if the issuer has been organized within the past five years;
  - \* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

<ul><li>* Each executive office</li><li>* Each general and mar</li></ul>		-		corp	orate general and ma	anagi	ng partners	s of pa	rtnership issuers; and	
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	☑ *of	Executive Officer* the Issuer's Managin		Director lember		General and/or Managing Partner	
Full Name (Last name first, if in Kioko, Janice A.	ndividual)						* -			
Business or Residence Address	(Number and	Stree	et, City, State, Zip (	lode)			· · · · · · · · · · · · · · · · · · ·			
c/o Goldman Sachs Princeton										
Check Box(es) that Apply:	☐ Promoter	0	Beneficial Owner.	Ø	Executive Officer*		Director		General and/or Managing Partner	
Full Name (Last name first, if in	ndividual)									
Business or Residence Address	(Number and	l Stre	et, City, State, Zip (	Code)			,4:			
Check Box(es) that Apply:	□ Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, if it	ndividual)									
Business or Residence Address	(Number and	l Stre	et, City, State, Zip (	Code)						
Check Box(es) that Apply:	□ Promoter	y (D) Para 3	Beneficial Owner	i V	Executive Officer	П	Director	0	General and/or Managing Partner	
Full Name (Last name first, if in	ndividual)			是" " "						
Business or Residence Address	(Number and	1 Stre	et, City, State, Zip (	Code)						
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner	0	Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, if in	ndividual)									
Business or Residence Address	(Number and	l Stre	et, City, State, Zip C	Code)						
Check Box(es) that Apply:	☐ Promoter	0	Beneficial Owner	Ο,	Executive Officer	0	Director		General and/or Managing Partner	
Full Name (Last name first, if in	ndividual)			er er er						
Business or Residence Address	(Number and	1 Stre	et, City, State, Zip (	lode)	**************************************					. : •
Check Box(es) that Apply:	□ Promoter		Beneficial Owner	0	Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, if in	ndividual)									
Business or Residence Address	(Number and	l Stre	et, City, State, Zip C	Code)						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	<del></del>			B. INI	FORMAT	ION ARC	LIT OFFI	CRING				·
			y				<del></del>				Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												$\square$
			A	nswer also	in Appendi	x, Column	2, if filing u	ınder ULOE	Ξ.			
2. What is the minimum investment that will be accepted from any individual?											\$1,00	0,000*
*The Managing Member of the Issuer, in its sole discretion, may accept subscriptions in lesser amounts.  3. Does the offering permit joint ownership of a single unit?											Yes ☑	No
commi If a per or state a broke	ssion or sin rson to be li es, list the n er or dealer,	nilar remuno sted is an a ame of the you may se	ted for each eration for s ssociated pe broker or de et forth the i	olicitation or age caler. If mo	of purchases nt of a brok ore than five	rs in connect er or dealer (5) person	ction with sa registered v s to be lister	ales of secur with the SE	rities in the C and/or wi	offering. th a state		
ruii Name	(Last name	: IIrst, II Ina	ividuai)									
	Sachs & C		<del></del>						·····			
Business o	r Residence	e Address (I	Number and	Street, City	y, State, Zip	Code)						
85 Broad	Street, New	York, Ne	w York 100	04			_					
Name of A	ssociated B	roker or De	ealer									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends to	o Solicit Pu	rchasers						
(Check "A	All States" o	or check inc	lividual Stat	es)					•••••		🗹 Al	l States
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	: first, if ind	ividuai)									
Pusiness o	r Pasidana	Address (	Number and	Street City	State 7in	Code						
Dusiness	n Residence	Address (1	vuilibel and	Succi, City	y, State, Zip	Couci						
Name of A	ssociated B	Broker or De	ealer				1000					
			s Solicited								П 41	l States
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (l	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	Broker or De	ealer					··· ·				
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			is Solicited a lividual Stat									All States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$	Offering Frice	\$		0
	Equity (Shares)		0			
	□ Common □ Preferred	Ψ-	<u> </u>	Ψ	_	
	Convertible Securities (including warrants)	\$	0	\$		0
	Partnership Interests	_			_	
	Other (Specify: Units of Limited Liability Company Interests)				_	
	Total				_	
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	217,037,800	φ	_	217,039,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors		189	\$		217,059,866
	Non-accredited Investors		0.	\$		0
	Total (for filings under Rule 504 only)		N/A			N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of			Dollar Amount
	Type of offering		Security			Sold
	Rule 505	_	N/A	\$		N/A
	Regulation A		N/A	\$		N/A
	Rule 504		N/A	\$	_	N/A
	Total	_	N/A	\$	_	N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$		0
	Printing and Engraving Costs			\$	_	0
	Legal Fees		Ø	\$	_	238,980
	Accounting Fees		Ø	\$	_	20,000
	Engineering Fees		0	\$		0
	Sales Commissions (specify finders' fees separately)		Ø	\$		651,180
	Other Expenses (identify)			\$		0
	Total		Ø	\$		910,160

	C. OFFERING PRICE, N	NUMBER OF INVESTORS, EXP	ENS	ES A	ND USE OF P	ROCE	EDS	
	b. Enter the difference between the aggregation 1 and total expenses furnished difference is the "adjusted gross proceeds to	gate offering price given in response to in response to Part C - Question 4.a.	Part ( a. Thi	C is	1100000	\$		216,149,706
5.	Indicate below the amount of the adjusted g to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted grosto Part C - Question 4.b. above.	_						
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0		\$_	0
	Purchase of real estate			\$_	0		\$_	0
	Purchase, rental or leasing and installation of	of machinery and equipment		\$_	0	_ 🗆	\$_	0
	Construction or leasing of plant buildings an	ad facilities		\$ <u></u>	0 .		\$_	0
	Acquisition of other businesses (including this offering that may be used in exchange another issuer pursuant to a merger)	ge for the assets or securities of	_	\$_	0		\$_	0
	Repayment of indebtedness			\$_	0		\$	0
	Working capital			<b>-</b> \$	0		\$	0
	Other (specify): Investment Capital			\$	0	- ☑	\$	216,149,706
	Column Totals			\$	0	_ <b>⊠</b>	<b>-</b>	216,149,706
	Total Payments Listed (column totals added)		, 	₩ \$	216,14	49,7(	)6	
		D. FEDERAL SIGNATUR	RE	3 W	10.			
fe	The issuer has duly caused this notice to be sollowing signature constitutes an undertaking of its staff, the information furnished by the issuer.	by the issuer to furnish to the U.S. Se	ecuriti	ies an	d Exchange Comr	mission,	upor	
Issi	uer (Print or Type)	Signature.	<u> </u>		Date	<del></del> -	_	
Go	oldman Sachs Global Event Driven, LLC	1 Moralie de Gal	2		May 13, 2004			
	ame of Signer (Print or Type)	Title of Signer (Print or Type)			11141			
Na	italie M. Gall	Vice President of the Issuer's Manag	oing	Mem'	her			

## ATTENTION